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FACSIMILE TRANSMITTAL

DATE: 10/09/2004	FROM: Samuel A. Kassatly
TO: Examiner Michael B. Holmes	TELEPHONE NO.: (408) 323-5111
U.S. Patent and Trademark Office	FACSIMILE NO.: (408) 521-0111
Group Art Unit: 2121	ATTY DOCKET NO.: ARC920010024US1
FACSIMILE NO.: 703 872-9306	SUBJECT: Amendment A

Title: "Method and System for Using Access Patterns to Improve
Web Site Hierarchy and Organization"

Applicant(s): Ramakrishnan Srikant, et al.

Attorney Docket No.: ARC920010024US1

Serial No.: ~~09/780,812~~ 09/757,759

Filing Date: 01/09/2001

TOTAL NUMBER OF PAGES INCLUDING THIS COVER PAGE 23.**THANK YOU FOR FORWARDING THIS DOCUMENT TO EXAMINER 2121**
AS SOON AS POSSIBLE.

Respectfully submitted,

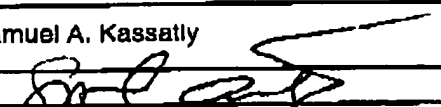
Samuel A. Kassatly
Reg. No. 32,247
Date: 10/09/2004Enclosure: Amendment A**CERTIFICATE OF FAXING**I hereby certify that this correspondence is being faxed to the U.S. Patent and Trademark Office,
to fax No. 703 872-9306, on 10/09/2004.

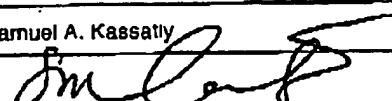
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PTO/SB/21 (08-03)
Approved for use through 07/31/2008. OMB 0551-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/780,843 09/757,759	RECEIVED CENTRAL FAX CENTER OCT 09 2004
	Filing Date	01/09/2001	
	First Named Inventor	Ramakrishnan Srikanth, et al.	
	Art Unit	2121	
	Examiner Name	Michael B. Holmes	
Total Number of Pages in This Submission	23	Attorney Docket Number	ARC820010024US1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attachment <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Assignment Recordation documents <input checked="" type="checkbox"/> Change of Correspondence Address (PTO/SB/122) <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Facsimile cover page 2) Certificate of Transmission
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Samuel A. Kassatly	
Signature		
Date	10/09/2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Samuel A. Kassatly	
Signature		Date 10/09/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT		(\$) 234	
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Complete if Known	
Application Number	69769,612 09/757,759
Filing Date	01/09/2001
First Named Inventor	Ramakrishnan Srikant, et al.
Examiner Name	Michael B. Holmes
Art Unit	2121
Attorney Docket No.	ARC920010024US1

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)
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☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: 09-0441

Deposit Account Name: International Business Machines

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayment(s)

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 780	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 090	2003 275	Plant filing fee	
1004 780	2004 395	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 88	2204 44	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$)234

*or number previously paid, if greater. For Reissues, see above.

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 60	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 65	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920	1804 920	Requesting publication of SIR prior to Examiner action	
1805 1,840	1805 1,840	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	66 Petition to revive - unavoidable	
1453 1,370	2453 685	685 Petition to revive - unintentional	
1501 1,370	2501 685	685 Utility issue fee (or reissue)	
1602 480	2502 240	245 Design issue fee	
1603 860	2503 330	330 Plant issue fee	
1460 130	1460 130	130 Petitions to the Commissioner	
1807 50	1807 50	50 Processing fee under 37 CFR 1.17(a)	
1808 180	1808 180	180 Submission of Information Disclosure Sheet	
8021 40	8021 40	40 Reasoning with patent assignment per property (times number of properties)	
1809 790	2809 395	395 Filing a submission after final rejection (37 CFR 1.129(e))	
1810 780	2810 395	395 For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	395 Request for Continued Examination (RCE)	
1602 000	1602 000	000 Request for accelerated examination of a design application	
Other fee (specify):			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3)			(\$)0

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Samuel A. Kassaly	Registration No. (Attorney/Agent)	32,247
Signature		Telephone	408-323-5111
		Date	

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